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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number or ☒ Correspondence address belowName Darin WilliamsAddress 11265 E. Chuckwagon CircleCity TucsonState ArizonaZIP 85749Country USATelephone 520 760 1702Fax 520 760 1704

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Joanna MargaretFamily Name
or Surname WilliamsInventor's
Signature Joanna Margaret WilliamsDate 12-4-01Residence: City TucsonState ArizonaCountry USACitizenship USMailing Address 11265 E. Chuckwagon CirCity TucsonState ArizonaZIP 85749Country USNAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) Darin ScottFamily Name
or Surname WilliamsInventor's
Signature Darin Scott WilliamsDate 12-4-01Residence: City TucsonState ArizonaCountry USACitizenship USMailing Address 11265 E. Chuckwagon CirCity TucsonState ArizonaZIP 85749Country USA☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.